



On the Radar

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9 years of On the Radar

The first issue of *On the Radar* appeared on 5 July 2010. Initially produced as an internal resource for Commission personnel it quickly developed an audience beyond the Commission. Nine years and 424 issues later my editorial task remains much the same – compiling a succinct synopsis of recent material relevant to safety and quality in health care. I hope you find it useful and relevant.

Dr Niall Johnson
Editor

On the Radar is a summary of some of the recent publications in the areas of safety and quality in health care. Inclusion in this document is not an endorsement or recommendation of any publication or provider. Access to particular documents may depend on whether they are Open Access or not, and/or your individual or institutional access to subscription sites/services. Material that may require subscription is included as it is considered relevant.

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On the Radar

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Reports

The NHS Patient Safety Strategy: Safer culture, safer systems, safer patients

NHS England

London: NHS England and NHS Improvement; 2019. p. 84.

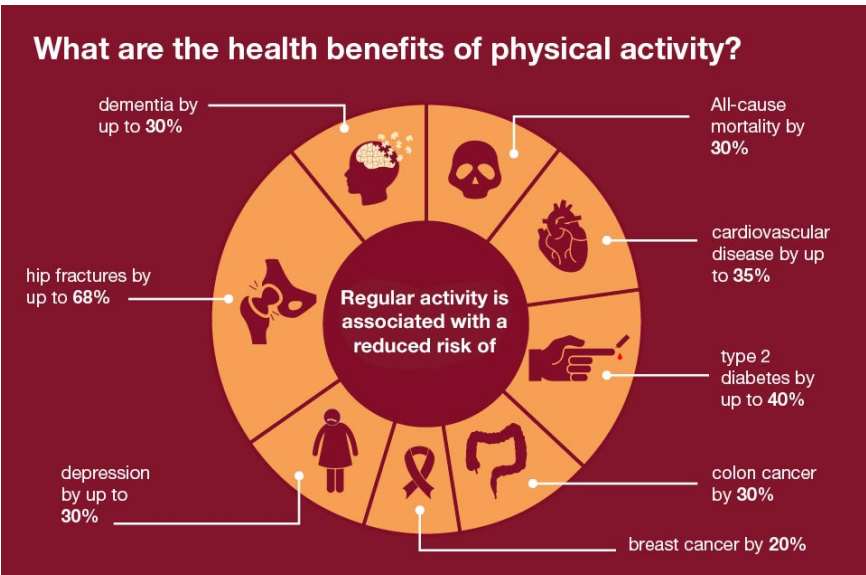
URL	https://improvement.nhs.uk/resources/patient-safety-strategy/
Notes	<p>NHS England and NHS Improvement have recently released the <i>NHS Patient Safety Strategy</i>. This document states the safety vision of the NHS (to continuously improve patient safety). This is to be achieved by building on two foundations: a patient safety culture and a patient safety system. Three strategic aims will support the development of both:</p> <ul style="list-style-type: none"> • improving understanding of safety by drawing intelligence from multiple sources of patient safety information (Insight) • equipping patients, staff and partners with the skills and opportunities to improve patient safety throughout the whole system (Involvement) • designing and supporting programmes that deliver effective and sustainable change in the most important areas (Improvement). <p>The strategy emphasises the need to support staff and look at systems rather than blaming individuals when incidents occur. Key features include a safety syllabus and training for all staff, a requirement for all NHS organisations to identify a specialist to lead on patient safety, a new national incident management system, the involvement of patients and a national patient safety improvement programme.</p>

Moving Matters - Interventions to Increase Physical Activity

Themed review

National Institute for Health Research

London: NHS NIHR; 2019. p. 46.

URL / DOI	<p>https://www.dc.nihr.ac.uk/themed-reviews/research-into-physical-activity.htm https://doi.org/10.3310/themedreview-03898</p>
Notes	<p>The UK's National Institute for Health Research (NIHR) has produced this themed review of the evidence from the NIHR and others on the issue of physical activity. The review draws together recent NIHR-funded research evaluating what works in getting people active and sustaining that activity. Using more than 50 published and ongoing studies it examines physical activity in all ages, as well as workplace changes and the effect of the built and natural environment.</p>  <p>What are the health benefits of physical activity?</p> <p>Regular activity is associated with a reduced risk of:</p> <ul style="list-style-type: none"> dementia by up to 30% All-cause mortality by 30% cardiovascular disease by up to 35% type 2 diabetes by up to 40% colon cancer by 30% breast cancer by 20% depression by up to 30% hip fractures by up to 68%

Guide to Producing and Sourcing Quality Health Information

Guidelines to support high-quality health information for consumers and carers in Victoria

Walsh L, Hill S, Waterhouse T

Melbourne: Centre for Health Communication and Participation, La Trobe University; 2019. p. 65.

URL	https://www.latrobe.edu.au/chcp/health-information-guidelines
Notes	<p>The Centre for Health Communication and Participation at Latrobe University has published the <i>Guide to producing or sourcing quality health information for consumers and carers</i> with the aim of support health services develop and/or identify quality information for the people using their services.</p> <p>The Guide covers health information presented in a variety of formats – print, digital, video and audio – and covers information about conditions, treatments and health administration such as letters for admission. While developed for Victoria, it should be relevant for health services around Australia, and is aligned to the National Safety and Quality Health Service Standards.</p> <p>The Guide includes four Guidelines:</p> <ol style="list-style-type: none">1. Governance2. Partnering with consumers3. Supporting health literacy4. Sharing resources. <p>Each Guideline includes a list of key tasks, as well as links to resources that aid implementation. Each Guideline is paired with a self-evaluation toolkit which provides practical questions in a workbook format to aid implementation of the Guidelines or to review achievements.</p>

Journal articles

Comparative Analysis of Medicines Safety Advisories Released by Australia, Canada, the United States, and the United Kingdom

Perry LT, Bhasale A, Fabbri A, Lexchin J, Puil L, Joarder M, et al.

JAMA Internal Medicine. 2019;179(7):982-4.

DOI	https://doi.org/10.1001/jamainternmed.2019.0294
Notes	<p>This piece in <i>JAMA Internal Medicine</i> reports on an analysis of safety advisories issued about medications by the regulators in four nations with similar medical traditions, population health, and demographics—Australia, Canada, the United Kingdom, and the United States for the period 2007–2016.</p> <p>The study found that medicines regulators in Australia, Canada, the UK and the USA differed considerably in their use of public safety advisories to communicate about new and emerging risks of approved medicines. Over a ten-year period, a total of 680 side effects or other adverse events were described in 1440 advisories in the four countries. Australia’s Therapeutic Goods Association (TGA) was the least likely of the four regulators to issue safety advisories, publishing alerts for 29.6% of all safety issues, while the UK’s Medicines and Healthcare products Regulatory Agency issued the most - 47.6% of total safety issues. Concordance between regulators was low, with only 70 of the 680 drug-risk issues (10.3%) resulting in an advisory in all countries where the drug was marketed. Safety advisories included letters to health professionals, web alerts and bulletin articles (excluding recalls for manufacturing quality or medication misuse). The authors suggest that national policy differences including resource availability, and the capacity to undertake post-market monitoring may contribute to differences between regulators.</p>

For information on the Commission’s work on medication safety, see <https://www.safetyandquality.gov.au/our-work/medication-safety/>

Epilepsy prevention: an urgent global unmet need

The Lancet

The Lancet. 2019;393(10191):2564.

Epilepsy: A public health imperative

World Health Organization

Geneva: World Health Organization; 2019. p. 171.

DOI	<i>The Lancet</i> https://doi.org/10.1016/S0140-6736(19)31425-4 WHO https://www.who.int/mental_health/neurology/epilepsy/report_2019/en/
Notes	The editorial in <i>The Lancet</i> was prompted by the publication by the World Health Organization of <i>Epilepsy: A public health imperative</i> . This report highlights major gaps in awareness, diagnosis, treatment, and health policies related to epilepsy. Some 50 million people are affected worldwide, making epilepsy one of the most common and serious brain disorders. According to the report, about a quarter of epilepsy episodes are preventable.

An urgent need for antimicrobial stewardship in Indigenous rural and remote primary health care

Asha C Bowen, Kathryn Daveson, Lorraine Anderson and Steven YC Tong

Medical Journal of Australia. 2019;211(1):9-11.

Acute kidney injury in Indigenous Australians in the Kimberley: age distribution and associated diagnoses

Mohan JV, Atkinson DN, Rosman JB, Griffiths EK

Medical Journal of Australia. 2019;211(1):19-23.

Acute kidney injury in Indigenous Australians: an unrecognised priority for action

Cass A, Hughes JT

Medical Journal of Australia. 2019;211(1):14-5.

DOI	Bowen et al https://doi.org/10.5694/mja2.50216 Mohan et al https://doi.org/10.5694/mja2.50061 Cass and Hughes https://doi.org/10.5694/mja2.50232
Notes	The NAIDOC week issue of <i>MJA</i> covers a number of indigenous health issues, including an article describing the need for specific consideration of antimicrobial stewardship for indigenous communities in remote areas of Australia (Bowen et al). It calls for an approach that considers the high burden of infections in remote Australia and the high warranted use of antimicrobials in that context, and suggests there may be a need to assess whether current frameworks for AMS , which derive mainly from tertiary urban hospitals, are appropriate in remote settings . Amongst other things, it calls for increased consumer and health care provider engagement and education for remote communities, capacity building is needed for primary health care stewardship among pharmacists, general practitioners, nurses and Aboriginal health practitioners, and reporting of data on antimicrobial use and resistance from remote Australia. Another article (Mohan et al) and editorial (Cass and Hughes) discuss the high rates of acute kidney injury (AKI) in Indigenous Australians in the Kimberley. In people with AKI, 52% of principal diagnoses were infectious in nature; but fewer than one third of discharge summaries reported AKI. The authors conclude that “Systems-based approaches to identifying and managing patients with AKI, and preventing infections could improve health outcomes for Indigenous Australians.”

For information on the Commission’s work on antimicrobial stewardship, see <https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/ams-and-hai-resources-and-links/>

BMJ Leader

Volume 3, Issue 2 (June 2019)

URL	https://bmjleader.bmj.com/content/3/2
Notes	<p>A new issue of <i>BMJ Leader</i> has been published. Articles in this issue of <i>BMJ Leader</i> include:</p> <ul style="list-style-type: none"> • How leadership training saves money ‘service line leadership’ at Nottingham University Hospitals (Duncan Orme, Colin Campbell) • Evaluating the impact of a national clinical leadership fellow scheme (Judy McKimm, Donna Hickford, Peter Lees, Kirsten Armit) • Leadership perspective on the implementation of guidelines on healthcare-associated infections (Josephine Hegarty, Siobhan Murphy, Sile Creedon, Teresa Wills, Eileen Savage, Fiona Barry, Maura Smiddy, A Coffey, A Burton, D O'Brien, S Horgan, C Nibhuachalla, C Brennan, H Agreli, J Drennan) • How could NHS change management agents learn from corporate innovation strategy to deliver services more effectively? (Sermed Mezher, M Sajid) • Leadership development and primary care (Tim Swanwick, R Varnam) • Junior doctor engagement: what is it, why does it matter and what the workplace can do to improve it (Emily Ward)

Health Affairs

Volume 38, Number 7 (July 2019)

URL	https://www.healthaffairs.org/toc/hlthaff/38/7
Notes	<p>A new issue of <i>Health Affairs</i> has been published with the themes ‘Physicians, Nurses, Disparities, And More’. Articles in this issue of <i>Health Affairs</i> include:</p> <ul style="list-style-type: none"> • To Improve Outcomes, Health Systems Invest In Affordable Housing (David Tuller) • Physicians’ Well-Being Linked To In-Basket Messages Generated By Algorithms In Electronic Health Records (Ming Tai-Seale, Ellis C Dillon, Yan Yang, Robert Nordgren, Ruth L Steinberg, Teresa Nauenberg, Tim C Lee, Amy Meehan, Jinnan Li, Albert Solomon Chan, and Dominick L Frosch) • Accuracy Of The Relative Value Scale Update Committee’s Time Estimates And Physician Fee Schedule For Joint Replacement (John W Urwin, Emily Gudbranson, Danielle Graham, Dawei Xie, Eric Hume, and E J Emanuel) • In Hospitals With More Nurses Who Have Baccalaureate Degrees, Better Outcomes For Patients After Cardiac Arrest (Jordan M Harrison, Linda H Aiken, Douglas M Sloane, J Margo Brooks Carthon, Raina M Merchant, Robert A Berg, and Matthew D McHugh) • Daily Nursing Home Staffing Levels Highly Variable, Often Below CMS Expectations (Fangli Geng, David G Stevenson, and David C Grabowski) • The Role Of Social Risk Factors In Dialysis Facility Ratings And Penalties Under A Medicare Quality Incentive Program (Andrew C Qi, Anne M Butler, and Karen E Joynt Maddox) • A National Examination Of Long-Term Care Setting, Outcomes, And Disparities Among Elderly Dual Eligibles (Rebecca J Gorges, Prachi Sanghavi, and R Tamara Konetzka)

	<ul style="list-style-type: none"> • Racial And Ethnic Disparities In Care Following The New York State Sepsis Initiative (Keith Corl, Mitchell Levy, Gary Phillips, Kathleen Terry, Marcus Friedrich, and Amal N Trivedi) • Fewer Bonuses, More Penalties At Skilled Nursing Facilities Serving Vulnerable Populations (Jennifer Gaudet Hefele, Xiao “Joyce” Wang, and Emily Lim) • Growth Of Public Coverage Among Working Families In The Private Sector (Douglas Strane, Genevieve P Kanter, Meredith Matone, Ahaviah Glaser, and David M Rubin) • Blue-Collar Workers Had Greatest Insurance Gains After ACA Implementation (Sumit D Agarwal, Anna L Goldman, and B D Sommers) • Low-Income Childless Adults’ Access To Antidiabetic Drugs In Wisconsin Medicaid After Coverage Expansion (Nam Hyo Kim, Kevin A Look, and Marguerite E Burns) • Association Of State Policies With Medicaid Disenrollment Among Low-Income Medicare Beneficiaries (Eric T Roberts, Jacqueline Hayley Welsh, Julie M Donohue, and Lindsay M Sabik) • Twenty Years Of Antiretroviral Therapy For People Living With HIV: Global Costs, Health Achievements, Economic Benefits (Steven S Forsythe, William McGreevey, Alan Whiteside, Maunank Shah, Joshua Cohen, Robert Hecht, Lori A Bollinger, and Anthony Kinghorn) • Epidemiological And Health Systems Implications Of Evolving HIV And Hypertension In South Africa And Kenya (Brianna Osetinsky, Jan A C Hontelez, Mark N Lurie, Stephen T McGarvey, Gerald S Bloomfield, Sonak D Pastakia, Richard Wamai, Till Bärnighausen, Sake J de Vlas, and O Galárraga) • The Impact Of Price Regulation On The Availability Of New Drugs In Germany (Ariel D Stern, Felicitas Pietrulla, Annika Herr, Aaron S Kesselheim, and Ameet Sarpatwari) • Sending The Wrong Price Signal: Why Do Some Brand-Name Drugs Cost Medicare Beneficiaries Less Than Generics? (Stacie B Dusetzina, Shelley Jazowski, Ashley Cole, and Joehl Nguyen) • Air Ambulances With Sky-High Charges (Ge Bai, Arjun Chanmugam, Valerie Y. Suslow, and Gerard F Anderson) • ACO Contracts With Downside Financial Risk Growing, But Still In The Minority (Kristen A Peck, Benjamin Usadi, Alexander J Mainor, Elliott S Fisher, and Carrie H. Colla) • Impact Of Medicare Readmissions Penalties On Targeted Surgical Conditions (Karan R Chhabra, Andrew M Ibrahim, Jyothi R Thumma, Andrew M Ryan, and Justin B Dimick) • Nonopioid Overdose Death Rates Rose Almost As Fast As Those Involving Opioids, 1999–2016 (Christopher J Ruhm) • Dying To Access Methadone (Jessica L Gregg)
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BMJ *Quality and Safety* online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p>BMJ <i>Quality and Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Impact of audit and feedback with action implementation toolbox on improving ICU pain management: cluster-randomised controlled trial (Marie-José Roos-Blom, Wouter T Gude, Evert de Jonge, Jan Jaap Spijkstra, Sabine N van der Veer, Niels Peek, Dave A Dongelmans, N F de Keizer)

	<ul style="list-style-type: none"> • Reducing door-to-needle times in stroke thrombolysis to 13 min through protocol revision and simulation training: a quality improvement project in a Norwegian stroke centre (Soffien Chadli Ajmi, Rajiv Advani, Lars Fjetland, Kathinka Dehli Kurz, Thomas Lindner, Sigrunn Anna Qvindesland, Hege Ersdal, Mayank Goyal, Jan Terje Kvaløy, Martin Kurz) • mHOMR: a feasibility study of an automated system for identifying inpatients having an elevated risk of 1-year mortality (Pete Wegier, Ellen Koo, Shahin Ansari, Daniel Kobewka, Erin O'Connor, Peter Wu, Leah Steinberg, Chaim Bell, Tara Walton, Carl van Walraven, Gayathri Embuldeniya, Judy Costello, James Downar) • ‘This is our liver patient...’: use of narratives during resident and nurse handoff conversations (Thomas Kannampallil, Steve Jones, Joanna Abraham) • Reducing unnecessary sedative-hypnotic use among hospitalised older adults (Chris Fan-Lun, Clarissa Chung, Eun Hye Grace Lee, Elisabeth Pek, Rebecca Ramsden, Cheryl Ethier, Christine Soong) • Study of a multisite prospective adverse event surveillance system (Alan J Forster, Allen Huang, Todd C Lee, Alison Jennings, Omer Choudhri, Chantal Backman)
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Online resources

Clinical Communiqué

<https://www.thecommunikes.com/post/clinical-communicu%C3%A9-volume-6-issue-2-june-2019>

Volume 6 Issue 2, June 2019

This issue of *Clinical Communiqué* looks at **communicable diseases**, particularly influenza. The issue includes a discussion of one coroner’s finding into the deaths of two patients from **Influenza A**, along with expert commentaries on the recognition and management of influenza A illnesses and influenza planning, preparedness and outbreak management for seasonal and pandemic influenza.

[UK] NICE Guidelines and Quality Standards

<https://www.nice.org.uk/guidance>

The UK’s National Institute for Health and Care Excellence (NICE) has published new (or updated) guidelines and quality standards. The latest reviews or updates are:

- Clinical Guideline CG30 *Long-acting reversible **contraception***
<https://www.nice.org.uk/guidance/cg30>
- NICE Guideline NG127 ***Suspected neurological conditions: recognition and referral***
<https://www.nice.org.uk/guidance/ng127>

[UK] National Institute for Health Research

<https://discover.dc.nihr.ac.uk/portal/search/signals>

The UK’s National Institute for Health Research (NIHR) Dissemination Centre has released the latest ‘Signals’ research summaries. This latest release includes:

- Telephone or internet delivered talking therapy can alleviate **irritable bowel** symptoms
- Antiretroviral treatment can reduce the risk of **HIV transmission** between male partners to ‘zero’
- Antimicrobial central venous catheters do not reduce **infections in pre-term babies**
- New insights into how fatigue affects the lives of people on **dialysis**
- Providing pressurised air through a mask may improve outcomes for people with **deteriorating heart failure**

- More than 50% of **hip replacements** appear to last 25 years
- Psychological therapies may improve parenting skills in parents of **children with chronic illness**
- Steps to better understanding resistant behaviours and the culture of **bedside dementia care** in hospitals
- More than 80% of **total knee replacements** can last for 25 years
- Smartphones instead of direct supervision can improve adherence rates for **TB treatment**.

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